

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)
OCT 2 4 2013

ENTERED
Permit #: 13-0397
Date: 11-5-13
Amount Paid: \$850 + \$850
Refund: 10-24-13
11-5-13

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning.asp)

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER									
Owner's Name: Kevin Widiker / Ann Widiker		Mailing Address: 9008 136 th St		City/State/Zip: Chippewa Falls WI 54709		Telephone: 715-579-0017			
Address of Property: XXX Gerties Rd		City/State/Zip: Grand View WI 54839		Cell Phone: 715-579-0017		Plumber Phone: 715-579-0017			
Contractor: self		Contractor Phone: N/A		Plumber: N/A		Plumber Phone: 715-579-0017			
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone: N/A		Agent Mailing Address (include City/State/Zip):		Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
PROJECT LOCATION: NW 1/4, NE 1/4		Legal Description: (Use Tax Statement) 04-081-2-45-06-30-1		PIN: (23 digits) 08-005-3000		Recorded Document: (I.e. Property Ownership) 1111		Page(s) 883	
Gov't Lot		Lot(s)		CSM		Vol & Page		Lot(s) No. Block(s) No. Subdivision:	
Section 30, Township 45 N, Range 06 W		Town of: Grand View		Lot Size		Acreage 9			
<input type="checkbox"/> Shoreland →		<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (and, intermittent) Creek or Landward side of Floodplain? If Yes---continue →		Distance Structure is from Shoreline: feet		Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input checked="" type="checkbox"/> Non-Shoreland		<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage If Yes---continue →		Distance Structure is from Shoreline: feet		<input checked="" type="checkbox"/> No			

Value at Time of Completion * include donated time & material \$ 70,000	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water							
							<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> 1-Story	<input type="checkbox"/> Seasonal	<input type="checkbox"/> 1	<input type="checkbox"/> Municipal/City	<input type="checkbox"/> City	
							<input type="checkbox"/> Addition/Alteration	<input type="checkbox"/> 1-Story + Loft	<input checked="" type="checkbox"/> Year Round	<input type="checkbox"/> 2	<input checked="" type="checkbox"/> (New) Sanitary	<input type="checkbox"/> Sanitary (Exists) Specify Type: Conventional	<input checked="" type="checkbox"/> Well
							<input type="checkbox"/> Conversion	<input type="checkbox"/> 2-Story	<input type="checkbox"/> Basement	<input checked="" type="checkbox"/> 3	<input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon)		
							<input type="checkbox"/> Relocate (existing bldg)	<input type="checkbox"/> No Basement	<input type="checkbox"/> Foundation	<input type="checkbox"/> None	<input type="checkbox"/> Portable (w/service contract)		
<input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> Foundation	<input type="checkbox"/> None	<input type="checkbox"/> Compost Toilet										
<input checked="" type="checkbox"/> Manufacture													

Existing Structure: (if permit being applied for is relevant to it)	Length: 60	Width: 27	Height: 13
Proposed Construction:	Length:	Width:	Height:

Proposed Use	✓	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Principal Structure (first structure on property)	<input type="checkbox"/>		()	
<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	<input type="checkbox"/>		()	
<input type="checkbox"/> with Loft	<input type="checkbox"/>		()	
<input type="checkbox"/> with a Porch	<input type="checkbox"/>		()	80
<input type="checkbox"/> with (2 nd) Deck	<input type="checkbox"/>		()	36
<input type="checkbox"/> with a Deck	<input type="checkbox"/>		()	36
<input type="checkbox"/> with (2 nd) Deck	<input type="checkbox"/>		()	
<input type="checkbox"/> with Attached Garage	<input type="checkbox"/>		()	
<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	<input type="checkbox"/>		()	
<input checked="" type="checkbox"/> Mobile Home (manufactured date) 2002	<input checked="" type="checkbox"/>		()	1620
<input type="checkbox"/> Addition/Alteration (specify)	<input type="checkbox"/>		()	
<input type="checkbox"/> Accessory Building (specify)	<input type="checkbox"/>		()	
<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	<input type="checkbox"/>		()	
<input type="checkbox"/> Special Use: (explain)	<input type="checkbox"/>		()	
<input type="checkbox"/> Conditional Use: (explain)	<input type="checkbox"/>		()	
<input type="checkbox"/> Other: (explain)	<input type="checkbox"/>		()	

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

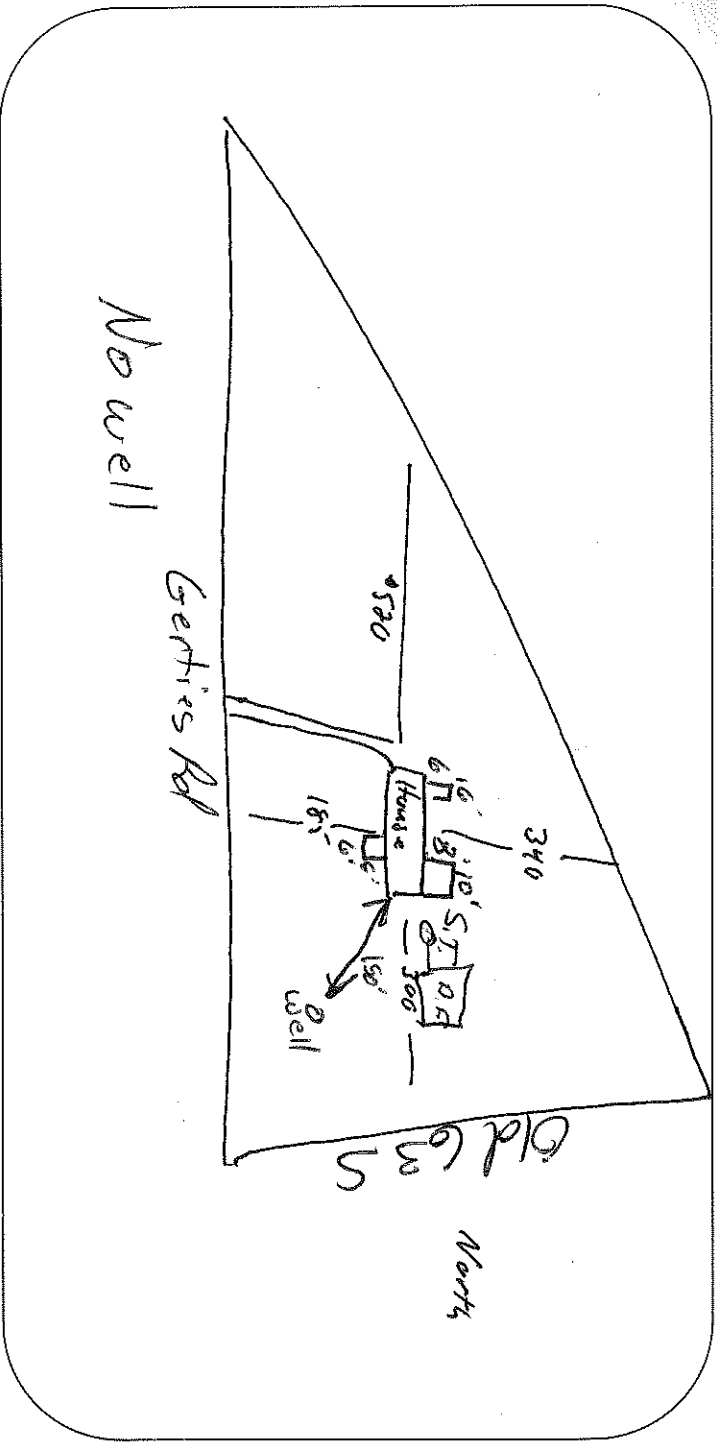
Owner(s): Ann L. Widiker, Kevin L. Widiker
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: _____ Date: 10/10/2013
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 9008 136th St Chippewa Falls WI 54709
Copy of Tax Statement ✓

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

- (1) Show Location of:
 (2) Show / Indicate:
 (3) Show Location of (*):
 (4) Show:
 (5) Show:
 (6) Show any (*):
 (7) Show any (*):
- Proposed Construction
 North (N) on Plot Plan
 (*) Driveway and (*) Frontage Road (Name Frontage Road)
 All Existing Structures on your Property
 (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
 (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
 (*) Wetlands; or (*) Slopes over 20%



Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	18'5" Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	15'0" Feet	Setback from the River, Stream, Creek	N/A Feet
Setback from the North Lot Line	30'0" Feet	Setback from the Bank or Bluff	N/A Feet
Setback from the South Lot Line	52'0" Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	34'0" Feet	Setback from 20% Slope Area	N/A Feet
Setback from the East Lot Line	15'0" Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	14'5" Feet	Setback to Well	18'0" Feet
Setback to Drain Field	15'5" Feet		
Setback to Privy (Portable, Composting)	N/A Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain Field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 09-1625	# of bedrooms: 3	Sanitary Date: 11-18-09
Permit Denied (Date):	Reason for Denial:			
Permit #: 13-0397	Permit Date: 11-5-13			
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	<input checked="" type="checkbox"/> No	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	<input checked="" type="checkbox"/> No	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.)	Case #:	Case #:		
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed		
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Inspection Record:	Inspected by: M. Fritsch			
HT Structure is on site..	Metal setback			
Date of Inspection: 11-4-13	Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No (If No they need to be attached.)				
Post-a-Petty must be removed by 12-1-13.				
Signature of Inspector: M. Fritsch	Date of Approval: 11-4-13			
Hold For Sanitary: <input type="checkbox"/>	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>